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7590 05/24/2006 Troy J. Cole Suite 3700 Bank One Center/Tower			Wall 5 8 July 2		have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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08/31/2008 HVUONG2 00000022 10701047					1	not Lune	(Signature)
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FC: 1504 300.00 GP AFFERMATION NO. FILING DATE: 00 03			TIP OT NAME OF THE OWNER.				
			FIRST NAMED INVENTOR		ror	ATTORNBY DOCKET NO.	CONFIRMATION NO.
10/701,047 11/04/2003 TITLE OF INVENTION: ADAPTIVE EQUALIZER HAVING A VA			Jingsong Xia			31075-128	5532
APPLN. TYPE SMALL ENTITY		ISSUB FI	ISSUB FEE PU		BLICATION FBE	TOTAL FEE(S) DUB	DATE DUE
nonprovisional	YES \$70		0		\$300	\$1000	08/24/2006
EXAM	ART UNIT		CLASS-SUBCLASS				
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Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) MICRONAS SEMICONDUCTORS. INC. PALATINE. ILLINOIS Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
a. The following fee(s) are S Issue Fee Publication Fee (No s Advance Order - # of	4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3381 (enclose an extra copy of this form).						
. Change in Entity Status a. Applicant claims Si	(from status indicated above MALL ENTITY status. See 1	9) 37 CFR 1 27	Nh Annline-	iene	longer claiming \$3.543	LL ENTITY status. See 37 C	NED 1 077 \(\(\) (0)
			ion Fee (if any) of from anyone of Office.	or to r	re-apply any previoush an the applicant; a regi	y paid issue fee to the applic stered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature			Date	124 Bach			
Typed or printed name Patrick J. O'Shea			Registration No. 35.305				
his collection of information a application. Confidential abmitting the completed applications and the completed applications for the complete applications and the complete applications are applications.	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. uplication form to the USPT	11. The information 122 and 37 CFR 1 0. Time will vary	n is required to o	btain tion is the ir	or retain a benefit by to sestimated to take 12 redividual case. Any co	he public which is to file (an ninutes to complete, includi mments on the amount of ti	d by the USPTO to process) ng gathering, preparing, and me you require to complete

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